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intEgrating Smoking Cessation  
treatment As part of usual  
Psychological care for dEpression  
and anxiety (ESCAPE): a randomised  
and controlled, multicentre,  
acceptability, feasibility and  
implementation trial

Background

People with depression/anxiety are twice as likely to smoke as are the general population. In England, people with depression/anxiety can access psychological services known as IAPT, which could offer smoking cessation treatment as part of usual care but currently do not. We aim to examine if it is possible to offer smoking cessation treatment alongside UC in a pilot and feasibility RCT.

Methods

A randomised and controlled, multi-centre trial to test the acceptability, feasibility and implementation of smoking cessation treatment as offered alongside IAPT usual care, compared to usual care alone, with nested qualitative methods.

Results

- Trial is ongoing. 68/159 people recruited to-date.
- 62 of these have reached 3-month follow-up.
- 6-month follow-up underway.
- Interviews and the intervention satisfaction survey suggest that the smoking cessation intervention is acceptable to participants.
- During interviews clinicians report that the smoking cessation intervention is feasible.
- Fidelity data are currently being collected.

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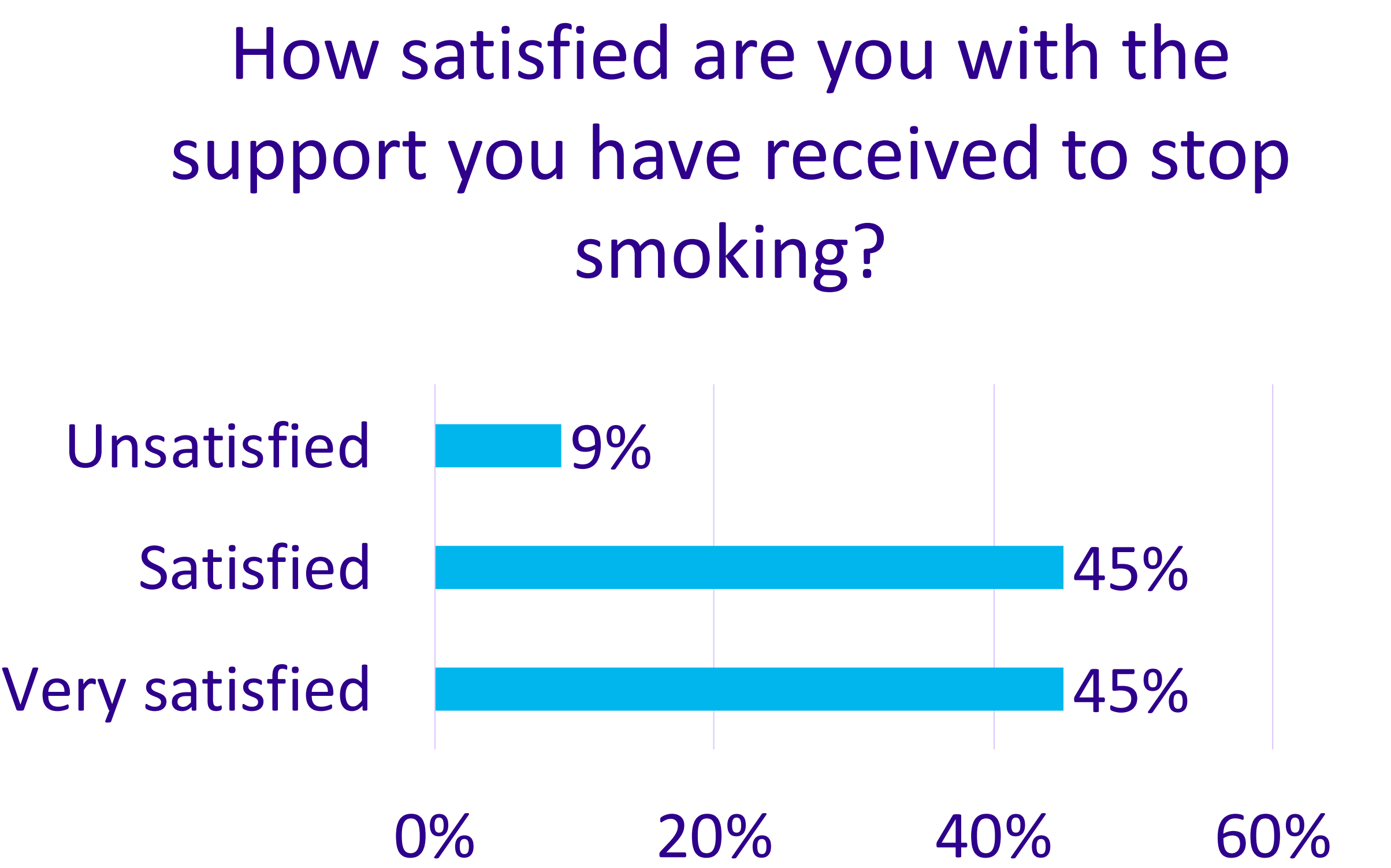


Smoking cessation  
treatment can be  
integrated into usual  
psychological care for  
common mental disorders  
in the UK’s National  
Health Service



Baseline characteristics		
	Treatment A (N=34)	Treatment B (N=34)
Male %	32% (11/34)	35% (12/34)
Age, M (SD)	33 (11)	36 (13)
White %	94% (32/34)	97% (33/34)
PHQ-9, M (SD)	15 (6)	14 (6)
GAD-7, M (SD)	14 (5)	12 (5)
HIS, M (SD)	2 (1)	3 (2)

3-month follow-up		
	Treatment A (N=31)	Treatment B (N=31)
Number of DNAs, M (SD)	1 (1)	1 (1)
Withdrawn from study %	3% (1/31)	16% (5/31)
Withdrawn from IAPT %	16% (5/31)	16% (5/31)
Self-report quit %	10% (3/31)	26% (8/31)
CO-verified quit %	0% (0/31)	16% (5/31)



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